

**Application Data Sheet****Application Information**

Application Type::	National Stage
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	METHOD FOR PREPARING A DAIRY PRODUCT
Attorney Docket Number::	0508-1169
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	7
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: STEPHANE  
Middle Name::  
Family Name:: DOAT  
Name Suffix::  
City of Residence:: LA VILLE DU BOIS  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 6, ALLEE DES MESANGES  
Address::  
City of Mailing Address:: LA VILLE DU BOIS  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-91620

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: SPAIN  
Status:: Full Capacity  
Given Name:: ELENA  
Middle Name::  
Family Name:: VELA ROCA  
Name Suffix::  
City of Residence:: BARCELONA  
State or Province of  
Residence::  
Country of Residence:: SPAIN  
Street of Mailing CALLE GOLF DE BISCAIA, 42  
Address:: SANT CUGAT DEL VALLES  
City of Mailing Address:: BARCELONA

State or Province of Mailing Address::  
Country of Mailing Address:: SPAIN  
Postal or Zip Code of Mailing Address:: E-08190

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: SPAIN  
Status:: Full Capacity  
Given Name:: AGUSTI  
Middle Name::  
Family Name:: MONTSERRAT CARRERAS  
Name Suffix::  
City of Residence:: BARCELONA  
State or Province of  
Residence::  
Country of Residence:: SPAIN  
Street of Mailing CARRETERA SANT ANTONI VILAMAJOR, 43  
Address:: LLINARS DEL VALLES  
City of Mailing Address:: BARCELONA  
State or Province of Mailing Address::  
Country of Mailing Address:: SPAIN  
Postal or Zip Code of Mailing Address:: E-08450

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: ARGENTINA  
Status:: Full Capacity  
Given Name:: RICARDO  
Middle Name::  
Family Name:: WEILL  
Name Suffix::  
City of Residence:: BUEONOS AIRES  
State or Province of  
Residence::  
Country of Residence:: ARGENTINA  
Street of Mailing EMILIO MITRE 279

Address:: VILLA SARMIENTO  
City of Mailing Address:: BUEONOS AIRES  
State or Province of Mailing Address::  
Country of Mailing Address:: ARGENTINA  
Postal or Zip Code of Mailing Address:: AR-1706

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: CLAUDE EMMANUELLE  
Middle Name::  
Family Name:: GASPARD  
Name Suffix::  
City of Residence:: PARIS  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: 98, RUE DE LA CROIX NIVERT  
Address::  
City of Mailing Address:: PARIS  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-75015

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: BERNARD  
Middle Name::  
Family Name:: ROBINE  
Name Suffix::  
City of Residence:: LES PLESSIS ROBINSON  
State or Province of  
Residence::

Country of Residence:: FRANCE  
 Street of Mailing 3, RUE DU CARREAU  
 Address::  
 City of Mailing Address:: LES PLESSIS ROBINSON  
 State or Province of Mailing Address::  
 Country of Mailing Address:: FRANCE  
 Postal or Zip Code of Mailing Address:: F-92350

**Correspondence Information**

Correspondence Customer 00466  
 Number::

**Representative Information**

Representative Customer	00466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR2005/000203	2/1/05

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	04/01513	2/16/04	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::